

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) The 2016 Committee		FEC IDENTIFICATION NUMBER ▼ C C00569905	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY	

Full Name of Payee ADVANCED RESPONSE SYSTEMS			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 13 / 2015	
Mailing Address 13175 GEORGE WEBER DRIVE			Amount 27594.29	
City ROGERS	State MN	Zip Code 55374-8900	Transaction ID : SE24.317	
Purpose of Expenditure DIRECT MAIL - PRINTING		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 13 / 2015	
Name of Federal Candidate DR. BEN CARSON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought 1217224.52			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee ALLEGRA			Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 13 / 2015	
Mailing Address 45668 TERMINAL DRIVE			Amount 104.02	
City DULLES	State VA	Zip Code 20166-4390	Transaction ID : SE24.68	
Purpose of Expenditure DIRECT MAIL - PRINTING		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 13 / 2015	
Name of Federal Candidate DR. BEN CARSON			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought 1217328.54			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	27698.31
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Robert Frank

[Electronically Filed]

Date

MM / DD / YYYY
 01 / 07 / 2016

Signature